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SUPPLEMENT 3 TO ATTACHMENT 2.6-A

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OMB NO.: 0938-0193

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: LDAHO

REASONABLE LIMITS ON AMOUNTS FOR NECESSARY MEDICAL OR REMEDIAL CARE NOT COVERED UNDER MEDICAID

TN No. 85-8 Supersedes TN No.

Approval Date 10/2/85 Effective Date 7//85

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